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Substitute for form 1449B/PTO <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> (use as many sheets as necessary)			<b>Complete If Known</b>		
			Application Number		
			Filing Date		
			First Named Inventor	Draper et al.	
			Group Art Unit		
			Examiner Name		
			Attorney Docket Number		
Sheet	2	of	2		

[illegible]

Examiner Signature	/Melissa Thompson/	Date Considered	02/09/2007
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Unique citation designation number. <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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